



Texas Department of Licensing and Regulation

PO Box 12157 • Austin, Texas 78711-2157

(800) 803-9202 • (512) 463-6599 • FAX (512) 475-2871

www.tdlr.texas.gov • cs.laserhair@tdlr.texas.gov

LASER HAIR REMOVAL PROFESSIONAL CERTIFICATE RENEWAL APPLICATION INSTRUCTIONS

The application must be completed and signed by the applicant. An application is not considered complete and will not be processed until all required items have been submitted. All information provided must be typed or printed in **black ink**. Attachments must be submitted on separate pieces of single-sided, 8½" x 11" paper. Use a paperclip to fasten all pages together, with the check or money order on top. **Do not use staples.**

DOCUMENTS SUBMITTED WITH YOUR APPLICATION WILL NOT BE RETURNED. KEEP A COPY OF YOUR COMPLETED APPLICATION, ALL ATTACHMENTS, AND YOUR CHECK OR MONEY ORDER.

1. NAME – Write your legal name in the spaces provided. (Last Name, First Name, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and II. (Mr. is not a suffix.)
2. LASER HAIR REMOVAL (LHR) CERTIFICATE NUMBER: Write your current Laser Hair Removal Certificate number.
3. DATE OF BIRTH – Write your birthdate.
4. SOCIAL SECURITY NUMBER – Write your Social Security Number. Social Security Number disclosure is required by Section 231.302(c)(1) of the Texas Family Code to obtain a license. Your Social Security Number is subject to disclosure to an agency authorized to assist in the collection of child support payments. For more information regarding child support payments, contact the Texas Attorney General at:

www.oag.state.tx.us/child/index or call (512) 460-6000 or (800) 252-8014.
5. EMAIL ADDRESS – By providing my email address I authorize TDLR to send licensing communications and required notices to me by electronic mail. I understand that I may revoke this authorization in writing and that I must update my email address or I will not receive these notices. I understand that the email address I have provided in this application will remain confidential except as permitted or required by law.
6. PHONE NUMBER – Write a telephone number, including the area code, where we can reach you during the day. This may be your office phone number where we can leave a message.
7. MAILING ADDRESS – Write your current mailing address. This is the address where we will send you mail. This address can be a post office box. You can add the zip plus-4 to help the postal service deliver mail more efficiently and accurately.
8. CRIMINAL HISTORY – Indicate if you have ever been convicted of or placed on deferred adjudication for any Misdemeanor or Felony, other than a minor traffic violation. If YES, complete and attach a Criminal History Questionnaire for each offense. This form can be obtained from the TDLR website at www.tdlr.texas.gov/MISC/lic002.pdf.
9. DISCIPLINARY ACTION HISTORY – Indicate if you have ever had a professional license, certification, or registration suspended, canceled, revoked, or denied in any state. If Yes, complete and attach a Disciplinary Action Questionnaire for each disciplinary action. This form can be obtained from the TDLR website at [www.tdlr.texas.gov/misc/Disciplinary Action Questionnaire.pdf](http://www.tdlr.texas.gov/misc/Disciplinary_Action_Questionnaire.pdf)
10. PROOF OF CONTINUING EDUCATION - Submit proof of completion for the 8 hours of continuing education as required by 16 Texas Administrative Code, Chapter §118.35.
11. STATEMENT OF APPLICANT - Carefully read the statement before dating and signing your application.

DEFAULT ON STUDENT LOANS State law prohibits renewing a license more than once after a licensee has defaulted on a student loan guaranteed by the **Texas Guaranteed Student Loan Corporation (TGS LC)** unless the licensee has entered a repayment agreement with TGS LC. **YOU SHOULD CONTACT TGS LC BEFORE FILING THIS APPLICATION** if you have defaulted on a student loan. An application or renewal may be rejected if this agency has received information from TGS LC that the applicant has defaulted on a student loan. The Texas Guaranteed Student Loan Corporation can be contacted at: **Texas Guaranteed ATTN: Collections, PO Box 83100, Round Rock, TX 78683-3100, Telephone: (800) 222-6297, <http://www.tgslc.org> or email: cust.assist@tgslc.org.**



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DO NOT WRITE ABOVE THIS LINE

APPLICATION FEE: \$150.00 (FEE IS NON-REFUNDABLE)

This application must be completed and accompanied with the required fee. You must submit proof of current certification from a certifying entity approved by the department and completion for the 8 hours of continuing education as required in 16 TAC, Chapter 118.

1. Name:

Last Name

First Name

Middle Name

Suffix

2. LHR Certificate Number:

3. Date of Birth:

4. Social Security Number:

Month Day Year

See Instruction Sheet for Disclosure Information

5. Email Address:

6. Phone Number:

Ex: john DOE@aol.com See Instruction Sheet for Disclosure Information

Area Code

Number

7. Mailing Address:

(P.O. Box, Number, Street Name/Apartment Number)

City

State

Zip Code

8. Have you ever been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation?

☐ Yes ☐ No

If YES, complete and submit a Criminal History Questionnaire (CHQ) for each offense.

See instructions sheet for more information

9. Have you ever had a professional license, certification or registration suspended, canceled, revoked or denied in any state since your last renewal?

☐ Yes ☐ No

If YES, complete and submit a Disciplinary Action Questionnaire (DAQ) with this application.

This does not include your driver's license

10. You must submit proof of completion for the 8 hours of continuing education as required by 16 Texas Administrative Code, Chapter §118.35.

11. STATEMENT OF APPLICANT

I certify that I have read and will comply with all applicable laws and rules of the Laser Hair Removal Program including Health and Safety Code, Chapter 401, §§401.501-401.522; Occupations Code, Chapter 51; and administrative rules under 16 Texas Administrative Code, Chapters 60 and 118. I understand that providing false information on this application may result in denial of this application and/or revocation of the certification I am requesting and the possible imposition of administrative penalties.

Signature

Date